## **ENTRY BLANK**

PLEASE TYPE OR PRINT Entered previous May Show
🖾 yes 🗆 no
☐ Ms.
Mr. Artist THOMAS J. GOLYA STORK
Permanent (Last Name Last)
Address 33 E. CATAWBA AVE AKRON
Street
44301 Tel. (2(6) 773 - 5332
Zip Area Code
Temporary or
Studio Address
Street
Tel. ( )
Zip Area Code
If you do not presently live in one of the counties of the Western Reserve, which county were you born in?
Collaborator
(If Any)
If May Show entries are not accepted or not sold:
Artist will pick up at Museum.
Museum should dispose of.
☐ Museum should ship to artist C.O.D. at this address:
Special Instructions
When necessary include below instructions or a drawing of
how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

DO NOT DETACH

REJECTED

REJECTED

1983 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106

THOMAS	. GOLYA	STORK		1,
Name				
33 E. CA	TAUBA a	we.		
Address				
AKRON, OH	0		44301	
City & State			Zip	

This is your only receipt to claim your object(s).

1	☐ 1. Paintings ☐ 4. Sculpture		☐ 3. Photography
Title	STIC TROP DO	IMCER	

DO NOT WRITE IN THIS SECTION	ACCEPTED	REJECTED
64(4)	X	

2	☐ 1. Paintings ☐ 4. Sculpture	<ul><li>□ 2. Graphics</li><li>□ 5. Crafts</li></ul>	☐ 3. Photography
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FORESTVILLE, N.Y. FROCZE FRAME MIND DANCE

DO NOT WRITE IN THIS SECTION	ACCEPTED	REJECTED
65 (4)		X

RETURN OF OBJECTS: REJECTED: MAY31- JUNE 4 ACCEPTED: JULY 25-30

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